Case 17-11285-ref Doc 60 Filed 09/05/18 Entered 09/05/18 16:20:29 Desc Main

Fill in this info	rmation to identify your	case:	nt Page 1 of 5	2 TR. 11 T
Debtor 1	Luis A. Gonzalez		LauMan	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA	
Case number	17-11285-ref			Vec
(if known) 😝				Check if this is an amended filing
Official For	m 106E/F			

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

nam	e and case number (if known).	·	,				
Pai	t 1: List All of Your PRIORITY Unsecured C	laims					
1.	Do any creditors have priority unsecured claims aga	ainst you?					
	☐ No. Go to Part 2.						
	Yes.						
2.	2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.						
	(For an explanation of each type of claim, see the instru	actions for this form in the instruction	booklet.)	T-4-1-1-1-	Butantta	No. of the state of	
	21			Total claim	Priority amount	Nonpriority amount	
2.1	Internal Revenue Service	Last 4 digits of account number	9151	\$10,000.00	\$10,000.00	\$0.00	
	Priority Creditor's Name						
	Cincinnati, OH 45999-0030	When was the debt incurred?	2016				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check a	II that apply			
Who incurred the debt? Check one.		☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only  Type of PRIORITY unsecured claim:						
	☐ At least one of the debtors and another ☐ Domestic support obligations						
	☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government						
	Is the claim subject to offset?						
	No	Other. Specify					
	Yes	Federal inc	come tax	es			

Entered 09/05/18 16:20:29 Desc Main Case 17-11285-ref Doc 60 Filed 09/05/18 Page 2 of 5 number (if know) Document 17-11285-ref Debtor 1 Luis A. Gonzalez Pennsylvania Department of Last 4 digits of account number 8396 \$901.85 \$901.85 \$0.00 2.2 Revenue Priority Creditor's Name **Bankruptcy Division** When was the debt incurred? 2011-2014 P.O. Box 280946 Harrisburg, PA 17128-0946 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes Personal income taxes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Total claim 4:1 \$597.47 **Branch Banking & Trust Company** Last 4 digits of account number 9253 Nonpriority Creditor's Name **Bankruptcy Section** When was the debt incurred? P.O. Box 1847; 100-50-01-51 Wilson, NC 27894 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other, Specify Charge-off

Case 17-11285-ref Doc 60 Filed 09/05/18 Entered 09/05/18 16:20:29 Desc Main Page 3 of 5 number (if know) Document Debtor 1 Luis A. Gonzalez 17-11285-ref 4.2 **Branch Banking & Trust Company** Last 4 digits of account number 0450 \$14.00 Nonpriority Creditor's Name When was the debt incurred? **Bankruptcy Section** P.O. Box 1847; 100-50-01-51 Wilson, NC 27894 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims No No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge-off ☐ Yes 4.3 **Credit Control Services** Last 4 digits of account number \$150.00 Nonpriority Creditor's Name 5757 Phantom Drive When was the debt incurred? 2002 Suite 330 Henrico, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other\_Specify Insurance 4.4 LVNV Funding, LLC, assignee Last 4 digits of account number 3840 \$1,626.97 Nonpriority Creditor's Name of Citibank (South Dakota), N.A. When was the debt incurred? 2007 c/o Resurgent Capital Services P.O. Box 10587 Greenville, SC 29603-0587 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Credit card

Debts to pension or profit-sharing plans, and other similar debts

Debto	1 Luis A. Gonzalez	Document Page 4 of 5 number (if know) 17-11285-ref	
4.5	Pennsylvania Department of Revenue  Nonpriority Creditor's Name	Last 4 digits of account number 8396	\$228.42
	Bankruptcy Division P.O. Box 280946 Harrisburg, PA 17128-0946	When was the debt incurred? 2011-2014	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal income taxes	
4.6	Susquehanna Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$900.00
	521 N. 2nd Street Shamokin, PA 17872	When was the debt incurred? 2002	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	□ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card	
4.7	Torres Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	\$100.00
	27 Fairview St. Carlisle, PA 17015	When was the debt incurred? 2002	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
		report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Personal loan	

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

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Bank of America 475 Cross Point Parkway Getzville, NY 14068	Line	e <u><b>4.1</b></u> of (Check one):	☐ Part 1: Creditors with Prior ☐ Part 2: Creditors with None	,
	Las	t 4 digits of account num	ber	
Name and Address Bank of America 475 Cross Point Parkway Getzville, NY 14068	Line	which entry in Part 1 or F e <u>4.2</u> of ( <i>Check one</i> ): t 4 digits of account num	Part 2 did you list the original creditor?  Part 1: Creditors with Prior Part 2: Creditors with Nong	
Name and Address Branch Banking & Trust Compan Bankruptcy Section P.O. Box 1847; 100-50-01-51 Wilson, NC 27894	<b>y</b> Line	which entry in Part 1 or F  4.6 of (Check one):  t 4 digits of account num	Part 2 did you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nong	•

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This Information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims				5	
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	10,901.85
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	10,901.85
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	3,616.86
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	3,616.86